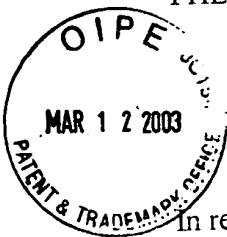


PHLY-24,896

PATENT



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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MAR 14 2003

Technology Center 2100

In re application of: Jeffrey Jovan Philyaw

Serial No.: 09/490,336

Filed: January 24, 2000

Group: 2143

Examiner: Nguyen

For: INPUT DEVICE HAVING POSITIONAL AND SCANNING CAPABILITIES

Assistant Commissioner for Patents
Washington, D. C. 20231

Dear Sir:

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AMENDMENT AND RESPONSE TO OFFICE ACTION

This communication is responsive to the Examiner's Office Action mailed November 22, 2002.

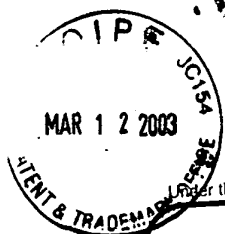
In the Claims

Below is a list of current claims with status identifiers.

- Sub A1 B1*
1. (Currently amended) A method of obtaining product-related information regarding a product, comprising the steps of:

AMENDMENT AND RESPONSE
S/N 09/490,336
Atty. Dkt. No. PHLY-24,896

2193



Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/490,336
	Filing Date	1/24/00
	First Named Inventor	Philyaw
	Group Art Unit	2143
	Examiner Name	Nguyen
	Attorney Docket Number	PHLY-24,896
Total Number of Pages in This Submission		10

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 50px; width: 100%;"></div>
Remarks		RECEIVED MAR 14 2003 Technology Center 2100

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	HOWISON, THOMA & ARNOTT, L.L.P.
Signature	2/23/03
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